

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

ATTORNEY'S DOCKET
PG3733USW

First Names Inventor:
Stephen Anthony
BURBIDGE

Complete if known:
App No.:

Filing Date

Group Art Unit:

() Declaration submitted with initial filing or

() Declaration submitted after initial filing (surcharge required 37CFR1.16(e))

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEW USES FOR POTASSIUM CHANNEL OPENERS

the specification of which (check only one item below):

[] is attached hereto.

OR

[x] was filed on 30 June 2000 as United States application Serial No. _____ or PCT International

Application Number PCT/GB00/02516 filed and was amended on (MM/DD/YYYY) _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY)	PRIORITY CLAIMED
1 9915414.8	GB	July 1, 1999	X
2			
3.			
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**COMBINED DECLARATION FOR UTILITY or DESIGN
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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	STATUS (Check one)		
		PATENTED	PENDING	ABANDONED

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Send Correspondence to:

23347

PATENT TRADEMARK OFFICE

Direct Telephone Calls to:

Bonnie Deppenbrock
919-483-1577

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2 0 1	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	BURBIDGE	Stephen	Anthony
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	Stevenage	GB	GB
2 0 2	POST OFFICE ADDRESS	GlaxoSmithKline Five Moore Drive	Research Triangle Park	North Carolina 27709, US
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	CLARE	Jeffrey	John
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2 0 3	POST OFFICE ADDRESS	Stevenage	GB	GB
	POST OFFICE ADDRESS	GlaxoSmithKline Five Moore Drive	Research Triangle Park	North Carolina 27709, US
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	COX	Brian	
2 0 4	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	Stevenage	GB	GB
	POST OFFICE ADDRESS	GlaxoSmithKline Five Moore Drive	Research Triangle Park	North Carolina 27709, US
	POST OFFICE ADDRESS	Greenwich	GB	GB
2 0 4	POST OFFICE ADDRESS	17 Guildford Grove	Greenwich	SE10 8JY, GB
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	DUPERE	Joseph Jonathan	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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2	FULL NAME OF INVENTOR	FAMILY NAME HAGAN	FIRST GIVEN NAME Russell	SECOND GIVEN NAME/INITIAL Michael
0	INVENTOR'S SIGNATURE	Signature		Date:
5	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
5	POST OFFICE ADDRESS	POST OFFICE ADDRESS Glax SmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY N rth Car lina 27709, US
2	FULL NAME OF INVENTOR	FAMILY NAME XIE	FIRST GIVEN NAME Xinmin	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	Signature		Date:
6	RESIDENCE & CITIZENSHIP	CITY Burlingame	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
6	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2633 Martinez Drive	CITY Burlingame	STATE & ZIP CODE/COUNTRY California 94010, US

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DECLARATION FOR "371" APPLICATION

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued				ATTORNEY'S DOCKET NUMBER PG3733USW
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Send Correspondence to:			Direct Telephone Calls to:	
			Bonnie Deppenbrock 919-483-1577	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME BURBIDGE	FIRST GIVEN NAME Stephen	SECOND GIVEN NAME/INITIAL Anthony
	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY Stevenage	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY North Carolina 27709, US
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME CLARE	FIRST GIVEN NAME Jeffrey	SECOND GIVEN NAME/INITIAL John
	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY Stevenage	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY North Carolina 27709, US
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME COX	FIRST GIVEN NAME Brian	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY Stevenage	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
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2 0 4	FULL NAME OF INVENTOR	FAMILY NAME DUPERE	FIRST GIVEN NAME Joseph	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	Signature X		Date: X
	RESIDENCE & CITIZENSHIP	CITY Cranfield	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 East Road Wharfedale End	CITY Cranfield	STATE & ZIP CODE/COUNTRY Bedfordshire MK43 0TD, GB

DECLARATION FOR "371" APPLICATION

2 0 5	FULL NAME OF INVENTOR	FAMILY NAME HAGAN	FIRST GIVEN NAME Russell	SECOND GIVEN NAME/INITIAL Michael
	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY North Carolina 27709, US
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME XIE	FIRST GIVEN NAME Xinmin	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE	Signature 		Date: 15/1/2002
	RESIDENCE & CITIZENSHIP	CITY Burlingame	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2633 Martinez Drive	CITY Burlingame	STATE & ZIP CODE/COUNTRY California 94010, US

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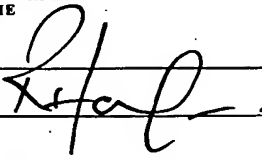
Direct Telephone Calls to:

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919-483-1577

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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		BURBIDGE	Stephen	Anthony
	INVENTOR'S SIGNATURE	Signature X		Date: X
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Stevenage	GB	GB
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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		CLARE	Jeffrey	John
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		COX	Brian	
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		DUPERE	Joseph	
	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Cranfield	GB	GB

DECLARATION FOR "371" APPLICATION

4	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 East Road Whorley End	CITY Cranfield	STATE & ZIP CODE/COUNTRY Bedf rdshire MK43 0TD, GB
2	FULL NAME OF INVENTOR	FAMILY NAME HAGAN	FIRST GIVEN NAME Russell	SECOND GIVEN NAME/INITIAL Michael
0	INVENTOR'S SIGNATURE	Signature X 		Date: X 19th December 2001
0	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
5	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY North Carolina 27709, US
2	FULL NAME OF INVENTOR	FAMILY NAME XIE	FIRST GIVEN NAME Xinmin	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE & CITIZENSHIP	CITY Burlingame	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
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		COX	Brian	
0	INVENTOR'S SIGNATURE	Signature		Date:
				19th December 2001
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Group Art Unit:

() Declaration submitted with initial filing or

() Declaration submitted after initial filing (surcharge required 37CFR1.16(e))

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEW USES FOR POTASSIUM CHANNEL OPENERS

the specification of which (check only one item below):

[] is attached hereto.

OR

[x] was filed on 30 June 2000 as United States application Serial No. _____ or PCT International
 Application Number PCT/GB00/02516 filed and was amended on (MM/DD/YYYY) _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY)	PRIORITY CLAIMED
1 9915414.8	GB	July 1, 1999	X
2			
3.			
4.			
5.			

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date (MM/DD/YYYY)
1.	
2.	
3.	
4.	

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PG3733USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	STATUS (Check one)		
		PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith. (List name and registration number)

Send Correspondence to:

Direct Telephone Calls to:

Bonnie Deppenbrock
919-483-1577

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		BURBIDGE	Stephen	Anthony
0	INVENTOR'S SIGNATURE	Signature X		Date: X
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Stevenage	GB	GB
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		GlaxoSmithKline Five Moore Drive	Research Triangle Park	North Carolina 27709, US
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		CLARE	Jeffrey	John
0	INVENTOR'S SIGNATURE	Signature X		Date: 12/12/01
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Stevenage	GB	GB
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		COX	Brian	
0	INVENTOR'S SIGNATURE	Signature X		Date: X
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
		DUPERE	Joseph	
0	INVENTOR'S SIGNATURE	Signature		Date:
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Cranfield	GB	GB

DECLARATION FOR "371" APPLICATION

4	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 East Road Whorley End	CITY Cranfield	STATE & ZIP CODE/COUNTRY Bedfordshire MK43 0TD, GB
2	FULL NAME OF INVENTOR	FAMILY NAME HAGAN	FIRST GIVEN NAME Russell	SECOND GIVEN NAME/INITIAL Michael
0	INVENTOR'S SIGNATURE	Signature X		Date: X
0	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
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2	FULL NAME OF INVENTOR	FAMILY NAME XIE	FIRST GIVEN NAME Xinmin	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE & CITIZENSHIP	CITY Burlingame	STATE OR FOREIGN COUNTRY US	COUNTRY OF CITIZENSHIP GB
6	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2633 Martinez Drive	CITY Burlingame	STATE & ZIP CODE/COUNTRY California 94010, US

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

ATTORNEY'S DOCKET
PG3733USW

First Names Inventor:
Stephen Anthony
BURBIDGE

Complete if known:
App No.:

Filing Date

Group Art Unit:

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Application No.	Filing Date (MM/DD/YYYY)
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**COMBINED DECLARATION FOR UTILITY or DESIGN
PATENT APPLICATION WITH POWER OF ATTORNEY** ContinuedATTORNEY'S DOCKET NUMBER
PG3733USW

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PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

		STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED

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	INVENTOR'S SIGNATURE	COX	Brian	
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	INVENTOR'S SIGNATURE	DUPERE	Joseph	
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DECLARATION FOR "371" APPLICATION

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